

Work Order ID **94095**

November-30-12 9:00:55 AM

**\*94095\***

Page 1

Item ID: **D3950-1**

Accept

**\*N900040100\***

Setup Start **\*NS1\***

Revision ID:

Stop **\*NS2\***

Item Name: RIVET

Start Date: 11/30/12

Start Qty: 6000

**\*60\***

Cust Item ID:

Required Date: 12/14/12

Req'd Qty: 6000

**\*60\***

Customer:

Reference:

Approvals:

Process Plan: **MLJ**

Date: **12-12-03**

Tooling:

Date:

QC:

Date:

SPC (Y/N):

Date:

Run Start **\*NR1\***

Stop **\*NR2\***

| Sequence ID/<br>Work Center ID | Operation<br>Description | Set Up/<br>Run Hours | Tool ID | Tool # | Plan<br>Code | Accept<br>Qty | Reject<br>Qty | Reject<br>Number | Insp.<br>Stamp |
|--------------------------------|--------------------------|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|
|--------------------------------|--------------------------|----------------------|---------|--------|--------------|---------------|---------------|------------------|----------------|

Draw Nbr

Revision Nbr

D3950

REV A

100

0.00

**\*100\***

Purchasing

Memo

0.00

Purchasing

Issue P/O: **18587**

Purchase Part Number: PR-71

Supplier: SPAENAU

Certificate of conformity is required

**12-5-12**  
**50**

110

Receive & Inspect for Damage & Mat'l Certs

0.00

**\*110\***

Packaging

Memo

0.00

Packaging

Ensure material certification is attached

**12/12/10** **(500)**

120

QC6- Inspect dimensions to drawing

0.00

**\*120\***

QC

Memo

0.00

Quality Control

**DAS**  
**15**  
**12/12/12**

**DAS**  
**16**  
**12/12/12**

**500**

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

|  |   |   |                                      |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
|--|---|---|--------------------------------------|------------------------------------|------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--|----------------------------------|--|------------------------------------|--|--------------------------------|------------------------------------|------------------------------------|-----------------------------------|--|
| Work Order: _____<br><br>Part No. _____<br><br>NCR No. _____ | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/><br>Work Order Update <input type="checkbox"/> | <b>AGAINST DEPARTMENT/PROCESS</b><br><br><table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table> | Skid-tube <input type="checkbox"/>   | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> |  |
| Skid-tube <input type="checkbox"/>                           | Crosstube <input type="checkbox"/>  | Water Jet <input type="checkbox"/>  | Engineering <input type="checkbox"/> |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Machining <input type="checkbox"/>                           | Small Fab <input type="checkbox"/>  | Prod. Eng. Coord. <input type="checkbox"/>  | Quality <input type="checkbox"/>     |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Thermoforming <input type="checkbox"/>                       | Finishing <input type="checkbox"/>  | Rec/Store/Packaging <input type="checkbox"/>  | Other <input type="checkbox"/>       |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Large Fab <input type="checkbox"/>                           | Composite <input type="checkbox"/>  | Supplier <input type="checkbox"/>   |                                      |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |

| Root Cause                             | Date | Step | Qty | Description of work order update or Non-conformance | Initial Chief Eng | Action Description | Sign & Date | Verification | QC Inspector |
|--|------|------|-----|---|-------------------|--------------------|-------------|--------------|--------------|
| Doc/Data <input type="checkbox"/>      |      |      |     |   |                   |                    |             |              |              |
| Equip/Tooling <input type="checkbox"/> |      |      |     |   |                   |                    |             |              |              |
| Operator <input type="checkbox"/>      |      |      |     |   |                   |                    |             |              |              |
| Material <input type="checkbox"/>      |      |      |     |   |                   |                    |             |              |              |
| Setup <input type="checkbox"/>         |      |      |     |   |                   |                    |             |              |              |
| Other <input type="checkbox"/>         |      |      |     |   |                   |                    |             |              |              |
| Process <input type="checkbox"/>       |      |      |     |   |                   |                    |             |              |              |
| Supplier <input type="checkbox"/>      |      |      |     |   |                   |                    |             |              |              |
| Training <input type="checkbox"/>      |      |      |     |   |                   |                    |             |              |              |
| Unapproved <input type="checkbox"/>    |      |      |     |   |                   |                    |             |              |              |

**FAULT CATEGORY**

| Landing Gear  | General                                 | Other  |
|---|---|--|
| <input type="checkbox"/> Bending                      | <input type="checkbox"/> Bend           | <input type="checkbox"/> Grain                           |
| <input type="checkbox"/> Centre Not Concentric to O/S | <input type="checkbox"/> BOM/Route      | <input type="checkbox"/> Hardware                        |
| <input type="checkbox"/> Cracks                       | <input type="checkbox"/> Broken/Damaged | <input type="checkbox"/> Inspection Incomplete           |
| <input type="checkbox"/> Crushed/Crimped              | <input type="checkbox"/> Burrs          | <input type="checkbox"/> Instructions Incomplete/Unclear |
| <input type="checkbox"/> Cuffs                        | <input type="checkbox"/> Contamination  | <input type="checkbox"/> Maintenance                     |
| <input type="checkbox"/> Heat Treat                   | <input type="checkbox"/> Countersink    | <input type="checkbox"/> Mislabeled                      |
| <input type="checkbox"/> Inspection Strip in Tube     | <input type="checkbox"/> Cut Too Short  | <input type="checkbox"/> Misread                         |
| <input type="checkbox"/> Ripples in Bend              | <input type="checkbox"/> Drill Holes    | <input type="checkbox"/> Offset                          |
| <input type="checkbox"/> Torque Waves in Extrusion    | <input type="checkbox"/> Drawing        | <input type="checkbox"/> Out of Calibration              |
| <input type="checkbox"/> Turning Sequence             | <input type="checkbox"/> Finish         | <input type="checkbox"/> Out of Sequence                 |
| <input type="checkbox"/> Wave/Twist in Tube           | <input type="checkbox"/> Folio          | <input type="checkbox"/> Outside Dimensions              |
|   |   | <input type="checkbox"/> Ovalized                        |
|   |   | <input type="checkbox"/> Over/Under tolerance            |
|   |   | <input type="checkbox"/> Part Incorrect                  |
|   |   | <input type="checkbox"/> Part Lost/Missing               |
|   |   | <input type="checkbox"/> Part Moved                      |
|   |   | <input type="checkbox"/> Positioned Wrong                |
|   |   | <input type="checkbox"/> Power Loss/Surge                |
|   |   | <input type="checkbox"/> Pressure/Forced                 |
|   |   | <input type="checkbox"/> Temperature/Cure                |
|   |   | <input type="checkbox"/> Weld                            |
|   |   | <input type="checkbox"/> Wrong Stock Pulled              |
|   |   | <input type="checkbox"/> Other                           |

# Picklist Print

November-30-12 9:00:54 AM

Page 1

Work Order ID: 94095

Parent Item: ~~D3950-1~~

Parent Item Name: RIVET

Start Date: 11/30/12

Required Date: 12/14/12

Start Qty: 60.00

Required Qty: 60.00

## Comments:

| Component Item ID/<br>Item Name      | Replacement<br>Item ID | Mfg/<br>Purch | Bin<br>Item | Primary<br>Location | Last<br>Location | Route<br>Seq ID | Unit of<br>Measure | Qty on<br>Hand | Qty per Kit | Total<br>Qty | Qty<br>Issued | Date<br>Issued | Status |
|--------------------------------------|------------------------|---------------|-------------|---------------------|------------------|-----------------|--------------------|----------------|-------------|--------------|---------------|----------------|--------|
| <del>22-71</del><br><del>Rivet</del> |                        | Purchased     | No          |                     |                  |                 | Each               | 0.0000         |             | 60           |               | 11/22/12       | 600    |

NCR: Yes / No

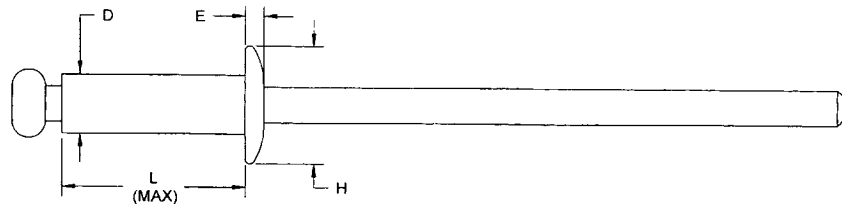
**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

|  |                                    |  |   |   |                          |  |                        |                     |   |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
|--|------------------------------------|--|---|---|--------------------------|--|------------------------|---------------------|---|--|--|------------------------------------|------------------------------------|------------------------------------|--------------------------------------|------------------------------------|------------------------------------|--|----------------------------------|--|------------------------------------|--|--------------------------------|------------------------------------|------------------------------------|-----------------------------------|--|
| Work Order: _____<br><br>Part No. _____<br><br>NCR No. _____   |                                    |  |   | <b>DISPOSITION</b><br><br>Rework <input type="checkbox"/><br>Scrap <input type="checkbox"/><br>Use-as-is <input type="checkbox"/><br>Work Order Update <input type="checkbox"/> |                          | <b>AGAINST DEPARTMENT/PROCESS</b><br><br><table style="width:100%; border: none;"> <tr> <td style="width:25%;">Skid-tube <input type="checkbox"/></td> <td style="width:25%;">Crosstube <input type="checkbox"/></td> <td style="width:25%;">Water Jet <input type="checkbox"/></td> <td style="width:25%;">Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table> |                        |                     |   |  |  | Skid-tube <input type="checkbox"/> | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/> | Engineering <input type="checkbox"/> | Machining <input type="checkbox"/> | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/> | Quality <input type="checkbox"/> | Thermoforming <input type="checkbox"/> | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/> | Large Fab <input type="checkbox"/> | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/> |  |
| Skid-tube <input type="checkbox"/>   | Crosstube <input type="checkbox"/> | Water Jet <input type="checkbox"/>           | Engineering <input type="checkbox"/>  |   |                          |  |                        |                     |   |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Machining <input type="checkbox"/>   | Small Fab <input type="checkbox"/> | Prod. Eng. Coord. <input type="checkbox"/>   | Quality <input type="checkbox"/>  |   |                          |  |                        |                     |   |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Thermoforming <input type="checkbox"/>   | Finishing <input type="checkbox"/> | Rec/Store/Packaging <input type="checkbox"/> | Other <input type="checkbox"/>  |   |                          |  |                        |                     |   |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Large Fab <input type="checkbox"/>   | Composite <input type="checkbox"/> | Supplier <input type="checkbox"/>            |   |   |                          |  |                        |                     |   |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| <b>Root Cause</b>  | <b>Date</b>                        | <b>Step</b>                                  | <b>Qty</b>  | <b>Description of work order update or Non-conformance</b>  | <b>Initial Chief Eng</b> | <b>Action Description</b>  | <b>Sign &amp; Date</b> | <b>Verification</b> | <b>QC Inspector</b>   |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Doc/Data <input type="checkbox"/>  |                                    |  |   |   |                          |  |                        |                     |   |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Equip/Tooling <input type="checkbox"/>   |                                    |  |   |   |                          |  |                        |                     |   |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Operator <input type="checkbox"/>  |                                    |  |   |   |                          |  |                        |                     |   |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Material <input type="checkbox"/>  |                                    |  |   |   |                          |  |                        |                     |   |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Setup <input type="checkbox"/>   |                                    |  |   |   |                          |  |                        |                     |   |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Other <input type="checkbox"/>   |                                    |  |   |   |                          |  |                        |                     |   |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Process <input type="checkbox"/>   |                                    |  |   |   |                          |  |                        |                     |   |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Supplier <input type="checkbox"/>  |                                    |  |   |   |                          |  |                        |                     |   |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Training <input type="checkbox"/>  |                                    |  |   |   |                          |  |                        |                     |   |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| Unapproved <input type="checkbox"/>  |                                    |  |   |   |                          |  |                        |                     |   |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| <b>FAULT CATEGORY</b>  |                                    |  |   |   |                          |  |                        |                     |   |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |
| <b>Landing Gear</b><br><input type="checkbox"/> Bending<br><input type="checkbox"/> Centre Not Concentric to O/S<br><input type="checkbox"/> Cracks<br><input type="checkbox"/> Crushed/Crimped.<br><input type="checkbox"/> Cuffs<br><input type="checkbox"/> Heat Treat<br><input type="checkbox"/> Inspection Strip in Tube<br><input type="checkbox"/> Ripples in Bend<br><input type="checkbox"/> Torque Waves in Extrusion<br><input type="checkbox"/> Turning Sequence<br><input type="checkbox"/> Wave/Twist in Tube |                                    |  | <b>General</b><br><input type="checkbox"/> Bend<br><input type="checkbox"/> BOM/Route<br><input type="checkbox"/> Broken/Damaged<br><input type="checkbox"/> Burrs<br><input type="checkbox"/> Contamination<br><input type="checkbox"/> Countersink<br><input type="checkbox"/> Cut Too Short<br><input type="checkbox"/> Drill Holes<br><input type="checkbox"/> Drawing<br><input type="checkbox"/> Finish<br><input type="checkbox"/> Folio |   |                          | <input type="checkbox"/> Grain<br><input type="checkbox"/> Hardware<br><input type="checkbox"/> Inspection Incomplete<br><input type="checkbox"/> Instructions Incomplete/Unclear<br><input type="checkbox"/> Maintenance<br><input type="checkbox"/> Mislabeled<br><input type="checkbox"/> Misread<br><input type="checkbox"/> Offset<br><input type="checkbox"/> Out of Calibration<br><input type="checkbox"/> Out of Sequence<br><input type="checkbox"/> Outside Dimensions  |                        |                     | <input type="checkbox"/> Ovalized<br><input type="checkbox"/> Over/Under tolerance<br><input type="checkbox"/> Part Incorrect<br><input type="checkbox"/> Part Lost/Missing<br><input type="checkbox"/> Part Moved<br><input type="checkbox"/> Positioned Wrong<br><input type="checkbox"/> Power Loss/Surge<br><br><input type="checkbox"/> Pressure/Forced<br><input type="checkbox"/> Temperature/Cure<br><input type="checkbox"/> Weld<br><input type="checkbox"/> Wrong Stock Pulled<br><br><input type="checkbox"/> Other |  |  |                                    |                                    |                                    |                                      |                                    |                                    |  |                                  |  |                                    |  |                                |                                    |                                    |                                   |  |

# SPECIFICATION CONTROL DRAWING



SHOWS  
RELATIVE  
ENGINEERING  
UNCONTROLLED  
SUBJECT TO  
WITH  
NO  
94095 MLJ  
12-12-03



**D3950-X RIVET**

| DART PART NUMBER | DESCRIPTION   | SUPPLIER | SUPPLIER PART NUMBER | MANUFACTURER NUMBER | RIVET BODY DIAMETER "D" | HOLE SIZE AND DRILL NUMBER | GRIP RANGE    | LENGTH UNDER HEAD "L" | HEAD DIAMETER "H" | HEAD HEIGHT "E" |
|------------------|---|----------|----------------------|---------------------|-------------------------|----------------------------|---------------|-----------------------|-------------------|-----------------|
| D3950-1          | RIVET - 5056 ALUMINUM BODY WITH COATED CARBON STEEL MANDREL | SPAENAU  | PR-71                | AD44BS              | 0.125                   | 0.129 - 0.133 #30          | 0.188 - 0.250 | 0.390                 | 0.250             | 0.040           |

**RELEASED**  
2009-08-28  
W

- NOTES:**
- 1) MATERIAL: SEE TABLE
  - 2) FINISH: N/A
  - 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
  - 4) UNITS: INCHES UNLESS OTHERWISE NOTED
  - 5) BREAK SHARP EDGES: N/A
  - 6) IDENTIFICATION: N/A
  - 7) WEIGHT: N/A

|            |             |          |
|------------|-------------|----------|
| A          | NEW ISSUE   | 09.06.05 |
| REV.       | DESCRIPTION | BY DATE  |
| DESIGN     |             |          |
| DRAWN      |             |          |
| CHECKED    |             |          |
| MFG. APPR. |             |          |
| APPROVED   |             |          |
| DE APPR.   |             |          |
| DATE       | 09.06.05    |          |

**DART AEROSPACE LTD**  
HAWKESBURY, ONTARIO, CANADA

DRAWING NO. **D3950** REV. A  
SHEET 1 OF 1

TITLE **RIVET** SCALE NTS

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Dart Aerospace Ltd.  
1270 Aberdeen Street  
Hawkesbury, ON K6A 1K7  
Tel: 613 632 9577  
Fax: 613 632 1053

## PURCHASE ORDER

Purchase Order ID PO18587

Purchase Order Date 12/05/12

PO Print Date 12/07/12

Page Number 1 of 2

Order From :

VC-HAS001

HASKINS INDUSTRIAL  
5-52 ANTARES DRIVE  
NEPEAN, ON K2E 7Z1  
CA

Contact Name

Vendor Phone 613 723 8800

Vendor Fax 613 723 8806

Vendor Account Nbr

Buyer

Requisition Nbr

Tax Resale Nbr 10127-2607

Terms

Currency

FOB

Brigitte Golden

Net 30

CAD

Destination-Collect

Ship To :

DART AEROSPACE LTD 1270 ABERDEEN  
HAWKESBURY, ON K6A 1K7  
CANADA

REVISED \$

| Line Nbr | Reference<br>Revision ID<br>Vendor Part Number | Description/<br>Mfg ID          | Req Date/<br>Taxable | Req Qty/<br>Unit of Measure | Ship Method | Unit Price | Extended<br>Price |
|----------|--|---------------------------------|----------------------|-----------------------------|-------------|------------|-------------------|
| 1        |  | R510 14.25MM Drill              | 12/10/12<br>Yes      | 4.00<br>Each                | Dicom       | \$345.2600 | \$1,381.04        |
| 2        | PR-71  | Rivet                           | 12/10/12<br>Yes      | 500.00<br>Each              | Dicom       | \$0.0294   | \$14.70           |
| 3        |  | OFPT06L5AFENGB<br>KC825M INSERT | 12/10/12<br>Yes      | 30.00<br>Each               | Dicom       | \$11.0200  | \$330.60          |
| 4        |  | SGS-36517 END-MIL 1/2           | 12/10/12<br>Yes      | 4.00<br>Each                | Dicom       | \$52.1500  | \$208.60          |

Deliver To: JL

Special Inst: As per DWG: D3950 Rev:A  
B94095

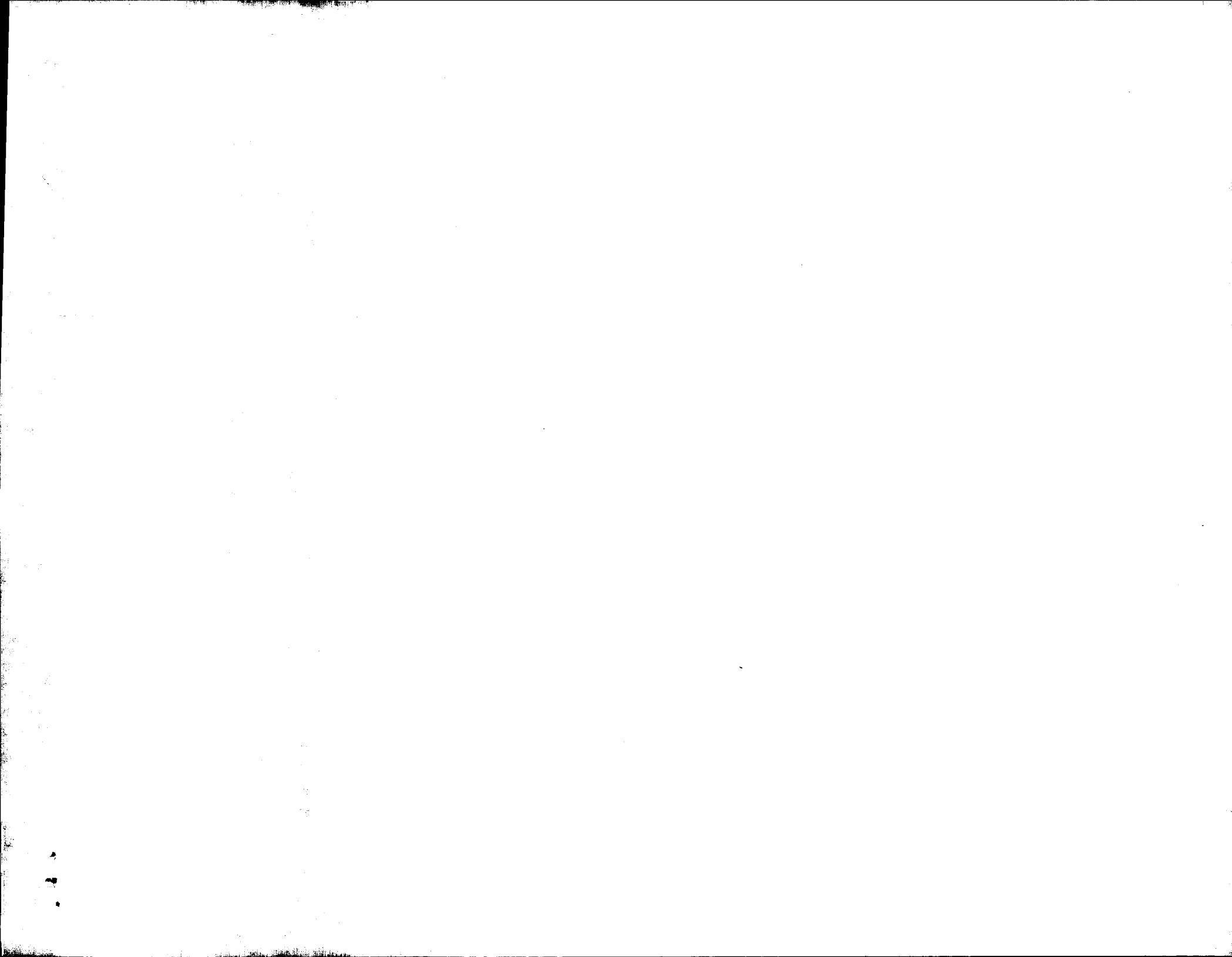
Deliver To: CNC

Deliver To: CNC

No substitution or deviation without  
consent.  
Certificate of Conformity or Material  
Certification required - YES NO

Change Nbr: 4

Change Date: 12/07/12



HASKINS INDUSTRIAL INC.  
5-52 ANTARES DRIVE

\*\* PACKING SLIP \*\*

Order # 1247358.00

Order Date 12/06/12

Page 1 of 1

\* Reprint \*

NEPEAN, ONTARIO K2E 7Z1  
TEL (613)723-8800 FAX (613)723-8806

Sold To: DART AEROSPACE LTD.  
1270 ABERDEEN STREET  
HAWKESBURY  
ON  
K6A 1K7

Ship To: DART AEROSPACE LTD.  
1270 ABERDEEN STREET  
HAWKESBURY  
ON  
K6A 1K7

| Cust Phone # | Warehouse | F.O.B. | Taken By           |
|--------------|-----------|--------|--------------------|
|              | OTTAWA    | DEST   | Sylvie 613-723-880 |

| Cust # | Customer P/O # | Required | Orig Order | Slsm | Ship Via | Terms  |
|--------|----------------|----------|------------|------|----------|--------|
| 05168  | 18587          | 12/07/12 | 1247358.00 | PL   | DICOM    | NET 30 |

| Ln# | Bin # | Order UM | Ship | B/O Product | Description |
|-----|-------|----------|------|-------------|-------------|
|-----|-------|----------|------|-------------|-------------|

|   |        |       |       |                   |                                    |
|---|--------|-------|-------|-------------------|------------------------------------|
| 1 |        | 4 EA  | 4 ✓   | PTD1X1<br>0115640 | R510 14.25MM DRILL                 |
| 2 |        | 500 C | 500 ✓ | SP1X100           | PR-71 RIVET                        |
| 3 |        | 30 EA | 30 ✓  | KEO1X1<br>2453684 | OFPT53AFEN4GB KC725M INSERT        |
| 4 |        | 4 EA  | 0     | 4 SGS1X1          | 36517 1/2" Z16CR CARB EM           |
| 5 | CB1185 | 5 EA  | 5 ✓   | PTD-0572085       | A012 31/64 JOBBER DRILL TIN (5)    |
| 6 | *      | 3 EA  | 3 ✓   | SO1X1             | 604-086 #26060 PITBULL CLAMP 6/PKG |
| 7 |        | 3 EA  | 0     | 3 1X1             | D675-KIT REBUILD KIT FOR VISE      |

PLEASE NOTE:

1. NO RETURNS WITHOUT PRIOR AUTHORIZATION
2. ALL SHORTAGE CLAIMS MUST BE WITHIN 10 DAYS
3. BO CODE: BO = QTY NOT SHIPPED IS BACK-ORDERED  
CL= QTY NOT SHIPPED WAS CANCELLED  
SC= ITEM CONSIDERED COMPLETE - NO B/O CREATED

FILL 9 PACK 8 DATE 12 17 12  
Printed on 2012-12-07 at 9:33